

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Gabe Nudo

Street Address

6410 53 Ave

City, State and Zip Code

Kenosha, WI 53142



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☒ January Continuing *2024*

☐ Pre-Primary _____

☐ July Continuing _____

☐ Spring

☐ Fall

☐ Special

☐ September Continuing _____

☐ Pre-Election _____

☐ Termination Report
also complete Schedule 4

**SUMMARY OF RECEIPTS AND
DISBURSEMENTS**

1. RECEIPTS

Column A
This Period

Column B
Calendar
Year-To-Date

1A. Contributions (Including Loans) from Individuals

\$ *7,425*

\$ *10,300*

1B. Contributions from Committees (Transfers-In)

\$ *25*

\$ *25*

1C. Other Income and Commercial Loans

\$

\$

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)

\$ *7,450*

\$ *10,325*

2. DISBURSEMENTS

2A. Gross Expenditures

\$ *3,477.86*

\$ *5,698.32*

2B. Contributions to Committees (Transfers-Out)

\$

\$ *1,950*

TOTAL DISBURSEMENTS (Add totals from 2A and 2B)

\$ *3,477.86*

\$ *7,648.32*

CASH SUMMARY

Cash Balance Beginning of Report

\$ *23,642.88*

Total Receipts

\$ *7,450.00*

Subtotal

\$ *31,092.88*

Total Disbursements

\$ *3,477.86*

CASH BALANCE END OF REPORT

\$ *27,615.02*

INCURRED OBLIGATIONS

(Balance at the Close of This Period-3A)

\$

LOANS (Balance at the Close of This Period-3B)

\$ *100*

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

GABRIELE NUDO

Signature of Candidate or Treasurer

Gabriele Nudo

Date:

1-12-23

Email

Daytime Phone:

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss. 11.1400, 11.1401, Wis. Stats.

Contributions (Including Loans) From Individuals

Complete Committee Name

FRIENDS OF GABE NYDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (If year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
7/6	DELEEN NEHLS 3402-13 PL KENOSHA WI 53144 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		500.00	
7/10	RONALD DIERSEN 6329-25 AVE KENOSHA WI 53143 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		250.00	
7/10	Joseph PASSARELLI 416-22 AVE KENOSHA WI 53140 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		500.00	
7/12	GREGG DICELLO Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		125.00	
7/12	ROBERT MORRONE 2350-2 ST KENOSHA WI 53140 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		500.00	
7/13	STEVE CASEY Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		500.00	
7/13	ANTHONY DE BARTOLO 9556 - MEADOWDALE LN PLEASANT PRAIRIE, IL 60158 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		500.00	

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ - 7

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Contributions (Including Loans) From Individuals

Complete Committee Name

FRIENDS OF GABE WUDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
7/13	JIMMY DOAN 5331-79 ST KENOSHA WI 53142 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#	5331-79 ST ✓	250.00	
7/14	JAMES TIRABASSI 8035. 22 AVE Kenosha WI 53143 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		250	
7/22	DAVID GEERTSEN 127-28 AVE RAKINE WI 53403 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		250.00	
7/25	ROSE BOGOSIAN 2410 - N WISCONSIN ST RACINE WI 53402 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		250.00	
8/13	DANIEL TENUTA Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		200.00	
8/13	JEFF ZARLETTI Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		125.00	
8/14	BOB PITTS Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		40.00	

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Contributions (Including Loans) From Individuals

Complete Committee Name

FRIENDS OF GABE NUDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
8/14	ROBERT LA MACCHIA Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		125.00	
8/17	DORI FARRELL 3435 - 98 PL PLEASANT PRAIRIE WI 53158 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		30.00	
8/14	FRANK DE BARTOLO 8039 - 15 AVE KENOSHA WI 53143 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		50.00	
8/18	RONALD BECKER 5421 - 61 ST KENOSHA WI 53142 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		25.00	
8/19	CARMINE SAVAGLIO 1723 - 38 CT KENOSHA WI 53140 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		125.00	
8/20	JOHN D SAVAGLIO 2410 - 11 ST KENOSHA WI 53140 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		125.00	
	JOHNATHAN SAVAGLIO Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID# _____		250.00	
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 730.00	
TOTAL ITEMIZED CONTRIBUTIONS			\$	
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$	
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$	

Contributions (Including Loans) From Individuals

Complete Committee Name

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
8/20	KATHLEEN BECKER 6603 - 43 AVE KENOSHA WI 53142 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		250.00	
8/20	JENNIFER TRECCI 3520 - 99 ST PLEASANT PRAIRIE WI 53158 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		100.00	
8/20	SUSAN LYNCH 6905 - 67 ST UNIT 302 KENOSHA WI 53142 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		25.00	
8/20	REBECCA LUZAR 5216 - 61 ST KENOSHA WI 53142 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		30.00	
8/20	MARTIN MOSKOPF 2844 - 25 ST KENOSHA WI 53140 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		40.00	
8/20	TONY ARNONE 452 - 49 AVE SOMERS WI 53144 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		100.00	
8/20	CASIE ARNONE 452 - 49 AVE SOMERS WI 53144 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		100.00	

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 420.00

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Contributions (Including Loans) From Individuals

Complete Committee Name

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
8/20	FRANCO CHIAPPETTA		50.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/20	ALFONSO MORRONE		40.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/20	BRIAN THOMAS		50.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/20	JOUAN MARICIC		50.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/20	LINDA SERPE		50.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/20	VINCENZO ARNONE 2000 - 24 ST KENOSHA WI 53140		100.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/20	ALEKSANDAR UROSEVIC 2307 ROMAYNE AVE RACINE WI 53402		100.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 440.00

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Contributions (Including Loans) From Individuals

Complete Committee Name

FRIENDS OF GABE NYDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
8/20	RAYO DJUKIC Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		50.00	
8/20	ADOLFO GRECO Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		40.00	
8/20	FRANK DATILO 4011 - 51 AVE KENOSHA WI 53144 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		25.00	
8/20	JOSIP GASPAREV 1300 - HARMONY DR RACINE WI 53402 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		20.00	
8/20	JEANNE KOSS 1441 - 28 CT KENOSHA WI 53140 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		20.00	
8/20	TONY SAVAGLIO Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		20.00	
8/20	TERRY ROSE 7608. 1/3 AVE KENOSHA WI 53143 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		20.00	

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE \$ 1950.00

TOTAL ITEMIZED CONTRIBUTIONS \$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS \$ 70.00

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$ 26

Contributions (Including Loans) From Individuals

Complete Committee Name:

FRIENDS OF GABE NUDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
8/20	MARIO DATILO		50.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/24	RICK BONANNO 4609 - 4 ST KENOSHA WI 53144		125.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/24	NUNZIO COVELLI		150.00	
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/25	MICHAEL TIRABASSI 5503 - 18 AVE KENOSHA WI 53140	PAINTING CONTRACTOR	500.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/25	JOE GEIGER		125.00	
	Check if: <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
8/28	LARRY BLOCK 7953 - 48 AVE KENOSHA WI 53142		125.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
9/30	ANDREW ELOVIC		100.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

Complete Committee Name

FRIENDS OF GABE NUDDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
10/10	STEVEN BELLA 442 - TINDALLS NEST TWIN LAKES WI 53181 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		100.00	
10/15	FAUSTO FIORAVANTI 4739 - 83 ST KENOSHA WI 53142 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#		125.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit - Ethics ID#			

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

RECEIPTS Contributions from Committees (Transfers-In)

Complete Committee Name

FRIENDS OF GABE NYDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name of Committee, Mailing Address and Zip Code	Amount of Contribution
8/20	ED HIBSCH FOR STATE ASSEMBLY 866. SHERIDAN RD KENOSHA WI 53140 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	25.00 25.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page 1 of

Complete Committee Name

FRIENDS OF GABE NYDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
7/7	KENOSHA NEWS	ADVERTISING	270.00
	Check if: <input type="checkbox"/> In-Kind Offset		
7/27	USPS SF	STAMPS	330.00
	Check if: <input type="checkbox"/> In-Kind Offset		
7/29	OFFICE MAX	ENVELOPES	48.01
	Check if: <input type="checkbox"/> In-Kind Offset		
8/4	KENOSHA NEWS	ADVERTISING	840.00
	Check if: <input type="checkbox"/> In-Kind Offset		
8/7	SKYPRINT	FLYERS	336.82
	Check if: <input type="checkbox"/> In-Kind Offset		
8/11	COSTCO		301.41
	Check if: <input type="checkbox"/> In-Kind Offset		
8/11	Sam's club		182.95
	Check if: <input type="checkbox"/> In-Kind Offset		
8/12	COSTCO	CHARCOAL	134.96
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$

TOTAL EXPENDITURES \$

SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

 Page 2 of

Complete Committee Name

FRIENDS OF GABE WUDD

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
8/13	WOODMAN Check if: <input type="checkbox"/> In-Kind Offset	PICNIC ITEMS	93.54
8/18	HANSEN Check if: <input type="checkbox"/> In-Kind Offset	BUTCHER PIG	43.00
8/19	MUSIC CENTER Check if: <input type="checkbox"/> In-Kind Offset	SPEAKER & MIKE RENTAL	70.00
8/19	KEITH WILSON Check if: <input type="checkbox"/> In-Kind Offset	LAMB	150.00
8/20	PAIELLI Check if: <input type="checkbox"/> In-Kind Offset	BREAD	26.53
8/24	KEVIN MULLENBECK Check if: <input type="checkbox"/> In-Kind Offset	PIG.	100.00
8/24	RUFFOLO REST Check if: <input checked="" type="checkbox"/> In-Kind Offset	PASTA & MEATBALLS FOR PICNIC	150.00
8/25	JACKPOT Check if: <input checked="" type="checkbox"/> In-Kind Offset		125.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES

\$

TOTAL EXPENDITURES

\$

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page 3 of

Complete Committee Name

FRIENDS OF GABE NYDO

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
8/25	MARISA NYDO	REIMBURSEMENT FOR PICNIC PURCHASES	235.64
	Check if: <input type="checkbox"/> In-Kind Offset		
9/10	BADGER VOTERS	VOTERS LIST	40.00
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		
	Check if: <input type="checkbox"/> In-Kind Offset		

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE \$

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$

TOTAL EXPENDITURES \$

SCHEDULE 3-B

Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE

Page 1 of 1

Complete Committee Name:

FRIENDS OF GABE NUDO

Instructions for completing schedules are on the back of each schedule.

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /	<u>GABE NUDO</u>	<u>100.00</u>	<u>0</u>	<u>0</u>	<u>100.00</u>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
Date / /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 100.00

TOTAL OUTSTANDING LOANS \$ 100.00